PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail AUG 0 4 2005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where
appropriate. All further prespective including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as
appropriate. All furness perceptionence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

06/30/2005

John A. Chionchio, Esquire Synnestvedt & Lechner LLP **Suite 2600** 1101 Market Street Philadelphia, PA 19107-2950

08/05/2005 WABDELR3 00000048 10613804

02 FC:1504

1400.00 DP

300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Dawn M. Larsen M M 2005 (Date) August 2,

APPLICATION NO. 30100 Ob FIRST NAMED INVENTOR CONFIRMATION NO. FILING DATE ATTORNEY DOCKET NO. Kevin J. Blease 26551 USA 7331 10/613,804 07/03/2003

TITLE OF INVENTION: LOOP SEAL FOR KNIFE GATE VALVE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	09/30/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	]	
PEAVEY, ENOCH E		3673		277-602000	•	
CFR 1.363).  Change of correspon Address form PTO/SB/  "Fee Address" indicates.	ce address or indication of "F idence address (or Change of 122) attached. ation (or "Fee Address" Indic or more recent) attached. Us	Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unles recordation as set forth (A) NAME OF ASSIGN	in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	pear on the patent. If an assign for filing an assignment.  CE: (CITY and STATE OR CO		document has been filed for
				patent): 🗖 Individual 🚨 C	orporation or other private gr	oup entity Government
4a. The following fee(s) are	e enclosed:	46	Payment of	` '	13	
	small entity discount permitter of Copies (10)	ed)	A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  Charge any fee deficiencies  The Director is hereby authorized by charge the required too(s), or credit any overpayment, to Deposit Account Number 19-5425 (enclose an extra copy of this form).			
_ ° ·	s (from status indicated above SMALL ENTITY status. See	•	🗖 b. Appli	cant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the red	o is requested to apply the Iss Publication Fee (if required) cords of the United States Pat	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if a d from anyor Office.	ny) or to re-apply any previous to other than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature	Jul act	<u></u>			ust 2, 2005	
Typed or printed name John A. Chionchio			*	_ Registration	No. 40,954	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name \_